

REMARKS

Claims 1 – 22 are pending in the application.

Claim Rejections – 35 USC 102 & 103

In this Official Action, Claims 1 – 3, 6-10, 12-13, 15-16, and 21 are rejected under 35 USC 102(b) as being anticipated by Microsoft™ screen Captures, Claims 4 and 5 are rejected under 35 USC 103(a) as unpatentable over Microsoft™ screen Captures, Claim 14 is rejected under 35 USC 103(a) as unpatentable over Microsoft™ screen Captures in view of Withworth (US Pub. No. 2001/0034717), Claims 11, 17, 19-20, and 22 are rejected under 35 USC 103(a) as unpatentable over Microsoft™ screen Captures in view of Woodring at al. (US Pub. No. 2003/00620045), and Claim 18 is rejected under 35 USC 103(a) as unpatentable over Microsoft™ screen Captures in view of Woodring at al. (US Pub. No. 2003/00620045) and Withworth (US Pub. No. 2001/0034717).

Favorable reconsideration of this rejection is respectfully requested in light of the above amendments for the reasons outlined below.

The present invention provides a novel intuitive system that allows a medical practitioner to take a continuous variable such as temperature, and divide it up into internal regions, as described on page 14, line 33:" the physician 60 makes use of a parameter value region selection and categorization tool for setting boundaries in a variation range of the parameter. The tool as shown is for categorizing a single

parameter. The parameter may be measured by the patient, measured by a laboratory, as will be described below, it may not be a measurement but rather a symptom.

The tool enables the physician to define regions there between and to categorize the regions".

The regions can then be labeled using intuitive labels, say traffic light colors. The patient can then be sent home, allowed to take his own measurements and he can then intuitively understand the color coding. Furthermore the regions are connected to rule based processing. A rule input device means an input for setting within the system a logical connection for defining outputs based on inputs and relationships between inputs, thus $Y=A\&B$. The system outputs can for example define actions such as sending an automatic warning to the doctor, as described on page 8, line 13:

"Likewise from the physician's point of view, he may wish to be notified immediately of urgent patient conditions and thus would like calls to be put through to a pager or to his mobile telephone if he cannot be contacted at his surgery, office or home. When he can be contacted at his surgery, office or home he may prefer to be contacted via the Internet for most situations. For extremely urgent situations the system may contact a hospital and/or order an ambulance."

Microsoft™ screen captures, as shown in the Examiner provided figures 1-11, introduces a slider which has fixed and predetermined internal regions, labels and output recommendations. As evident from these figures, the user may move a slider along the internal boundaries. However, the user may *never* set the boundaries, associate labels with the boundaries, or operate a rule input device for setting rules for associating output recommendations with the boundaries or with a combination thereof. That is to say, the user is limited to selecting the position of the slider in

relation to the predetermined regions, which are associated with predetermined labels and upon this position an output may be generated according to predetermined rules. However, the illustrated Microsoft™ screen captures never anticipate or hint at the idea of a parameter evaluation system where *a user, for example – a physician, may* set internal boundaries in a variation of one or more continuous parameters, such as body medical parameters of one of his patients, label these boundaries, or associate the boundaries with output recommendations, such as an alert call made to a physician upon the detection of an urgent patient condition as taught by the present invention, and explained above.

Claim 1 defines a parameter evaluation system comprising: a boundary input device, *user operable* for setting internal boundaries inside a variation range of one or more continuous parameters, thereby to define a plurality of internal regions within the variation range, a label input device, *user operable* for associating labels with the internal regions, a rule input device, *user operable* for setting rules to associate at least one of a plurality of output recommendations with each of the internal regions and with combinations thereof, and an output device configured to present a user with an output recommendation associated with a respective internal region or combination thereof, the output recommendation corresponding to at least one measured parameter input to the system.

As described above, and defined in claim 1, the present invention teaches a parameter evaluation system the user may operate for setting the boundaries for the continuous parameters, label the regions defined using the boundaries, and associate recommended outputs with the regions.

The WindowTM captures illustrated in the Examiner provided figures fails short of anticipating or even hinting at such a parameter evaluation system as taught by the present invention.

Thus, it is respectfully believed that claim 1 is novel, inventive and should be allowed.

Claim 21 defines a method of associating a series of outputs with detected levels of a plurality of continuously varying parameters, the detected levels comprising an outcome, the method comprising: *inviting a user to set* one or more internal boundary levels for each parameter, thereby defining internal regions between each boundary level, *inviting a user to associate categorization labels* with each the defined internal region, *inviting a user to associate rules* with each internal region and with combinations of internal regions of different parameters to associate a series of outputs with the regions and combinations, such that at least one of the series of outputs is produced by an outcome.

The illustrated MicrosoftTM screen captures never anticipate or hint at the idea such a method where *a user, for example – a physician, may set* internal boundaries in a variation of one or more continuous parameters, such as body medical parameters of one of his patients, label these boundaries, or associate the boundaries with output recommendations, such as an alert call made to a physician upon the detection of an urgent patient condition as taught by the present invention, and explained above.

Thus, it is respectfully believed that claim 21 is novel, inventive and should be allowed.

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The remaining claims are believed to be allowable as being dependent on allowable main claims.

All of the matters raised by the Examiner have been dealt with and are believed to have been overcome. In view of the foregoing, it is respectfully submitted that all the claims now pending in the application are allowable over the cited reference.

An early Notice of Allowance is therefore respectfully requested.

Respectfully submitted,

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